Marital Quality and Children with Autism Spectrum Disorders (ASD)

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DIVORCE AND CHILDREN WITH ASD

Only three recent studies have examined marital functioning in families of children with ASDs as compared to comparison groups (Freedman et al., 2011; Hartley et al., 2010; Lee, 2009). Findings from these studies were mixed; however, our study, offers an integration of these findings. We examined divorce histories in 391 families of adolescents and adults with ASDs (Hartley, et al., 2010). Overall, parents of children with ASDs had a similar rate of divorce as parents of children without disabilities during the early parenting years, but were more likely to divorce during the later parenting years (i.e., when the son or daughter was and adolescent or adult).

The reason that rates of divorce for parents of children with ASDs may be similar early on, but differ during later parenting years is not clear. In contrast, to the normative experience in which difficult child behavior problems (e.g., externalizing problems) decrease with age, individuals with ASDs can exhibit stressful symptoms and behavior problems that require high levels of caregiving into their adulthood. It is also possible that cumulative stress eventually takes its toll.

MARITAL SATISFACTION AND CHILDREN WITH ASD

We also examined the marital satisfaction across 7 years in 199 mothers of adolescents and adults with ASDs who remained married to the father of their child with an ASD. Our findings indicate that mothers' marital satisfaction was significantly related to the behavior problems of the adolescent or adult child with an ASD. On occasions when the grown child's behavior problems were less severe, mothers experienced higher marital satisfaction. In contrast, the grown child's autism symptoms and health were not significantly related to variability in the trajectory of marital satisfaction within-mothers. The high level of parenting stress resulting from the adolescent or adult's behavior problems may spillover into marital interactions; mothers may have fewer emotional and psychological resources to thwart arguments and promote positive interactions with their spouse. In addition, increases in the behavior problems of the adolescent or adult with an ASD may create opportunities for couples to disagree on parenting strategies. In turn, negative tension stemming from spousal interactions may make parents more negative and critical in their interactions with their son or daughter (Almeida et al., 1999).

TAKE HOME MESSAGE

Our research indicates that parents' marital relationship is an important resource for helping mothers and fathers handle the challenges of having a grown child with an ASD. Parents with higher marital satisfaction reported less parenting burden than did parents with below-average marital satisfaction. One's spouse is often their main source of support for dealing with parenting stressors, and thus a strong marital relationship may help buffer the negative impact of child-related stressors. In contrast, a poor marital relationship may be an added source of distress, and make it more difficult for a parent to manage child-related stressors. We also found that fathers who were highly satisfied in their marriage, reported being emotionally close to their grown child with an ASD,

whereas fathers who felt dissatisfied in their marriage reported having a more distant relationship with their child with an ASD.

HOW TO BEST SUPPORT PARENTS

Currently, services and supports for families of children with developmental disabilities tend to be directed toward mothers, with little consideration of fathers. Services also tend to be directed toward families of young children. Our research suggests that fathers, like mothers, are impacted by the challenges of parenting a child with an ASD. Moreover, these challenges are not limited to the early parenting years, but extend into the son or daughter's adolescence and adulthood. Thus, family supports and services geared toward these later parenting years are also needed for both mothers and fathers.

Our research suggests that a family systems approach should be used in services and supports. A family systems approach involves including multiple family members (e.g. mothers and fathers) in interventions and recognizing that the experiences and well-being of individuals in a family are interconnected. For instance, we found that fathers' depressive symptoms and pessimism about their son or daughter's future were related to the depressive symptoms of mothers. Moreover, the quality of parents' marital relationship is related to the parenting experiences of mothers and fathers. Thus, services aimed at helping parents' strengthen their marital relationship, such as by helping them find ways to communicate with and support each other and spend private couple time together despite their extraordinary day-to-day caregiving demands may be an important avenue for helping them manage parenting stress.

RELATED PAPERS:

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